

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Jeffrey S. Flier and Christian Bjorbaek
 Application No.: 10/040,277 Group: 1639
 Filed: October 22, 2001 Examiner: D. R. Byrd
 Confirmation No.: 9612
 For: Methods and Compositions for Modulating Ciliary Neurotrophic Factor Activity

OCT 20 2003

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:

10/9/03 Annie Demirel
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Annie Demirel
 Typed or printed name of person signing certificate

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is Reply to Restriction Requirement for filing in the above-identified application.

[X] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)

(COL. 2)

(COL. 3)

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	25	MINUS	* 25	
INDEP	8	MINUS	** 8	
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY

RATE	ADDITIONAL FEE
X \$ 9	\$ 0
X \$43	\$ 0
+ \$145	\$ 0

OR

OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE
X \$18	\$
X \$86	\$
+ \$290	\$

* not fewer than 20

** not fewer than 3

TOTAL = \$ 0 TOTAL = \$ 0

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input type="checkbox"/>	Other Fees:	\$ _____
		\$ _____
		\$ _____
		\$ _____
		TOTAL: \$ <u> 0 </u>

A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for one month Extension of Time	\$ <u> 55 </u>
<input type="checkbox"/>	Amendment Fee	\$ _____
<input type="checkbox"/>	Other Fees:	\$ _____
		\$ _____
		\$ _____
		\$ _____
		TOTAL: \$ <u> 55 </u>

A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

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Dated: 10/9/03